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Bib Data Sheet

CONFIRMATION NO. 5873

SERIAL NUMBER 10/649,495	FILING DATE 08/27/2003  RULE	CLASS 540	GROUP ART UNIT 1624	ATTORNEY DOCKET NO. CN01622
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/406,856 08/29/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>Brenda Coleman</i> Initials <i>BC</i>	NJ	0	39	2

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TITLE  
 Selective D1/D5 receptor antagonists for the treatment of obesity and CNS disorders

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 1092		<input type="checkbox"/> 1.16 Fees ( Filing )
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